

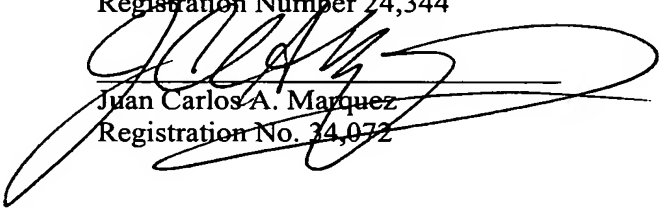


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- [] Please charge my **Deposit Account Number** _____ in the amount of _____ to cover the fees for _____. A duplicate copy of this paper is enclosed.
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- [x] The Commissioner is hereby authorized to charge any additional fees associated with this communication, including fees under 37 C.F.R. § 1.16 and 1.17, or credit any overpayment to **Deposit Account Number 08-1480**.

Respectfully submitted,

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October 20, 2005



UNITED STATES PATENT AND TRADEMARK OFFICE

In re U.S. Patent Application of)	
)	
AIZAWA et al.)	Art Unit 2655
)	
Application Number: 10/782,925)	Examiner Dieu Minh T. LE
)	
Filed: February 23, 2004)	
)	
For: DISK ARRAY SYSTEM AND A METHOD OF)	
AVOIDING FAILURE OF THE DISK ARRAY)	
SYSTEM)	
)	
Attorney Docket No. HITA.0522)	

**Honorable Assistant Commissioner
for Patents
Washington, D.C. 20231**

RESPONSE AND AMENDMENT UNDER 37 C.F.R. § 1.111

Sir:

This is in response to the Office Action dated August 22, 2005 and the phone call with the Examiner on September 21, 2005, the period for response to which is set to expire on November 22, 2005. Please amend the above-identified application as follows: